

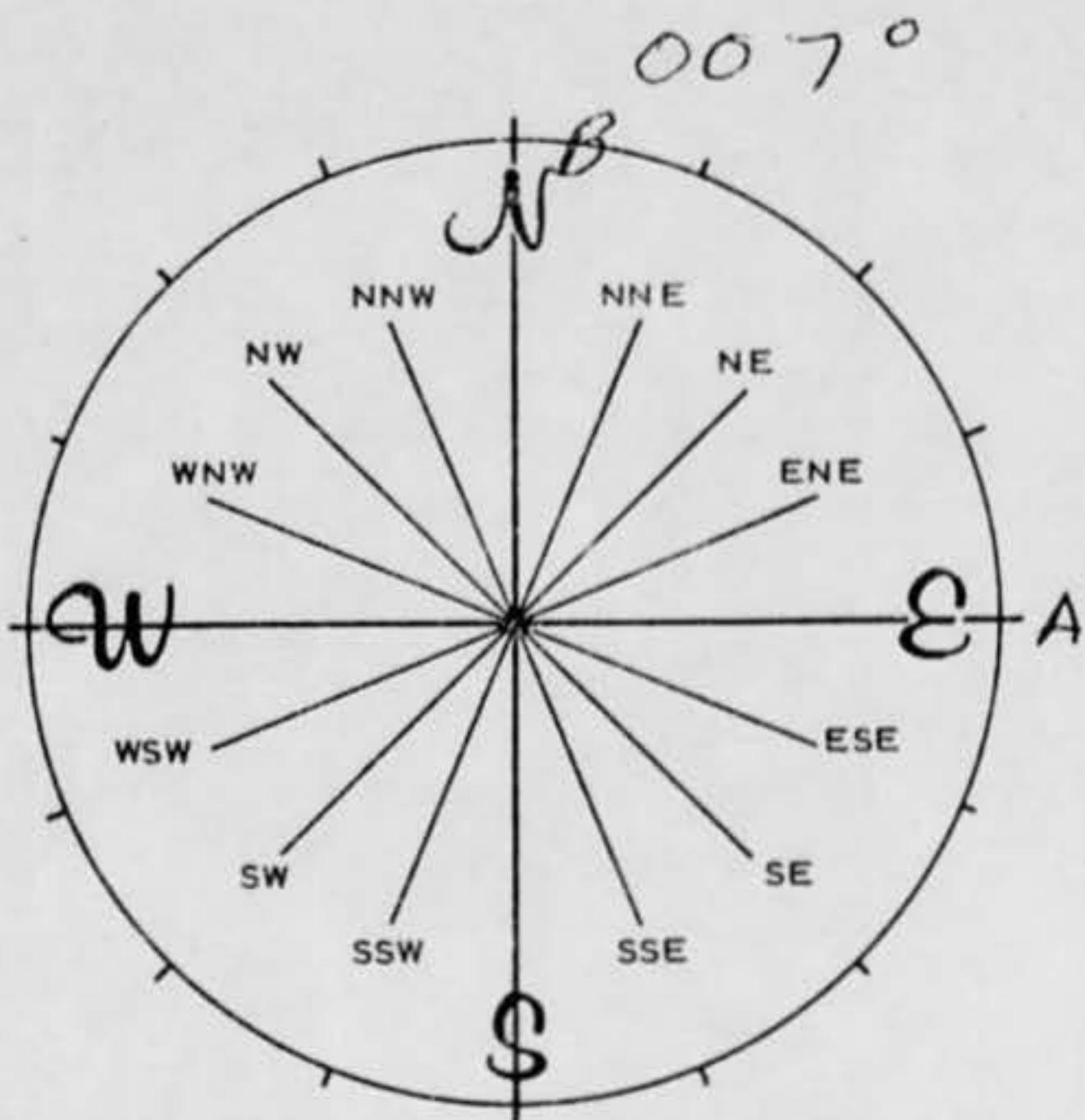
PROJECT 1073 RECORD

1. DATE - TIME GROUP December 1968 2145	2. LOCATION Memphis, Tennessee
3. SOURCE Civilian	10. CONCLUSION OTHER: CONFLICTING DATA
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION Conflicting	11. BRIEF SUMMARY AND ANALYSIS Observer reported to Duty Officer that he saw a saucer shaped craft on 12 December 1968. The craft was about 200 to 300 yards away, traveled at mach 1.2 and was seen for 5 seconds. In the AF Form 117 that he returned he stated that he saw the object on 11 December 1968. The object was about 300 yards away, traveled at mach 2.8 and was seen for 4 to 5 minutes.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE See Case	
8. PHOTOS <input type="checkbox"/> Yes <input type="checkbox"/> No	Director Aerospace Studies MITIN Archives Branch Maxwell AFB, Alabama
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	RETURN TO: K243.601.1 DEC 1968

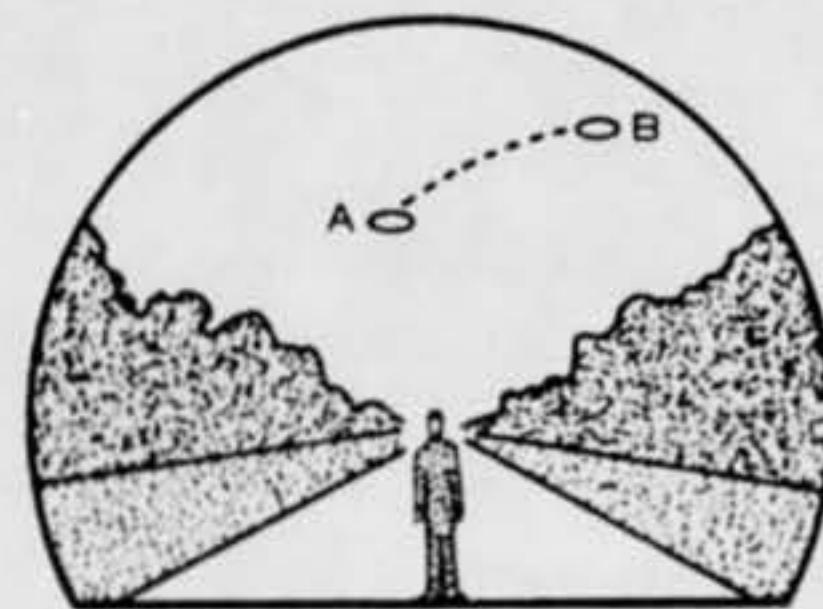
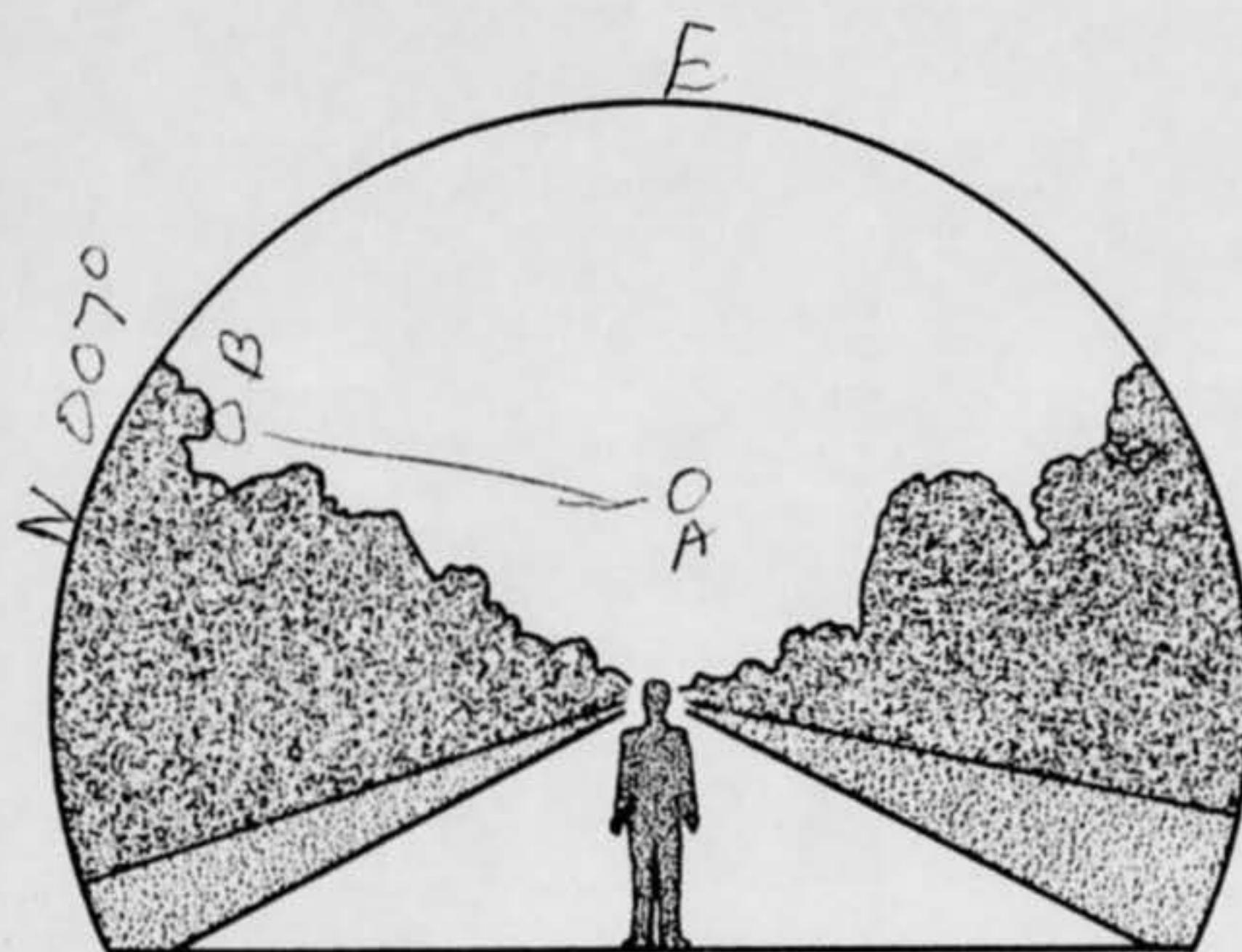
FORM
FTD SEP 63 0-329 (TDE)

Previous editions of this form may be used.

6A. NOW IMAGINE YOU ARE AT THE CENTER OF THE COMPASS ROSE. PLACE AN "A" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN FIRST SEEN. PLACE A "B" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN LAST SEEN.



7. IN THE SKETCH BELOW, PLACE AN "A" AT THE POSITION OF THE PHENOMENON WHEN FIRST SEEN, AND A "B" AT THE POSITION OF THE PHENOMENON WHEN LAST SEEN. CONNECT THE "A" AND "B" WITH A LINE TO APPROXIMATE THE MOVEMENT OF THE PHENOMENON BETWEEN "A" AND "B". THAT IS, SCHEMATICALLY SHOW WHETHER THE MOVEMENT APPEARED TO BE STRAIGHT, CURVED OR ZIG-ZAG. REFER TO SMALLER SKETCH AS AN EXAMPLE OF HOW TO COMPLETE THE LARGER SKETCH.



SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL
NUMBER 21-R258

THIS QUESTIONNAIRE HAS BEEN PREPARED SO THAT YOU CAN GIVE THE U.S. AIR FORCE AS MUCH INFORMATION AS POSSIBLE CONCERNING THE UNIDENTIFIED PHENOMENON THAT YOU HAVE OBSERVED. PLEASE TRY TO ANSWER ALL OF THE QUESTIONS. THE INFORMATION YOU GIVE WILL BE USED FOR RESEARCH PURPOSES. YOUR NAME WILL NOT BE USED IN CONNECTION WITH ANY OF YOUR STATEMENTS OR CONCLUSIONS WITHOUT YOUR PERMISSION. RETURN TO AIR FORCE BASE INVESTIGATOR FOR FORWARDING TO FTD (TDETR), WRIGHT-PATTERSON AFB, OHIO 45433, IAW AFR 80-17. (IF ADDITIONAL SHEETS ARE NEEDED FOR NARRATIVE OR SKETCHES ATTACH SECURELY TO THIS FORM OR ANNOTATE WITH YOUR NAME FOR IDENTIFICATION.)

1. WHEN DID YOU SEE THE PHENOMENON?

DAY 11 MONTH 12 YEAR 1968

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON?

HOUR 03 MINUTES 45 A.M. P.M.

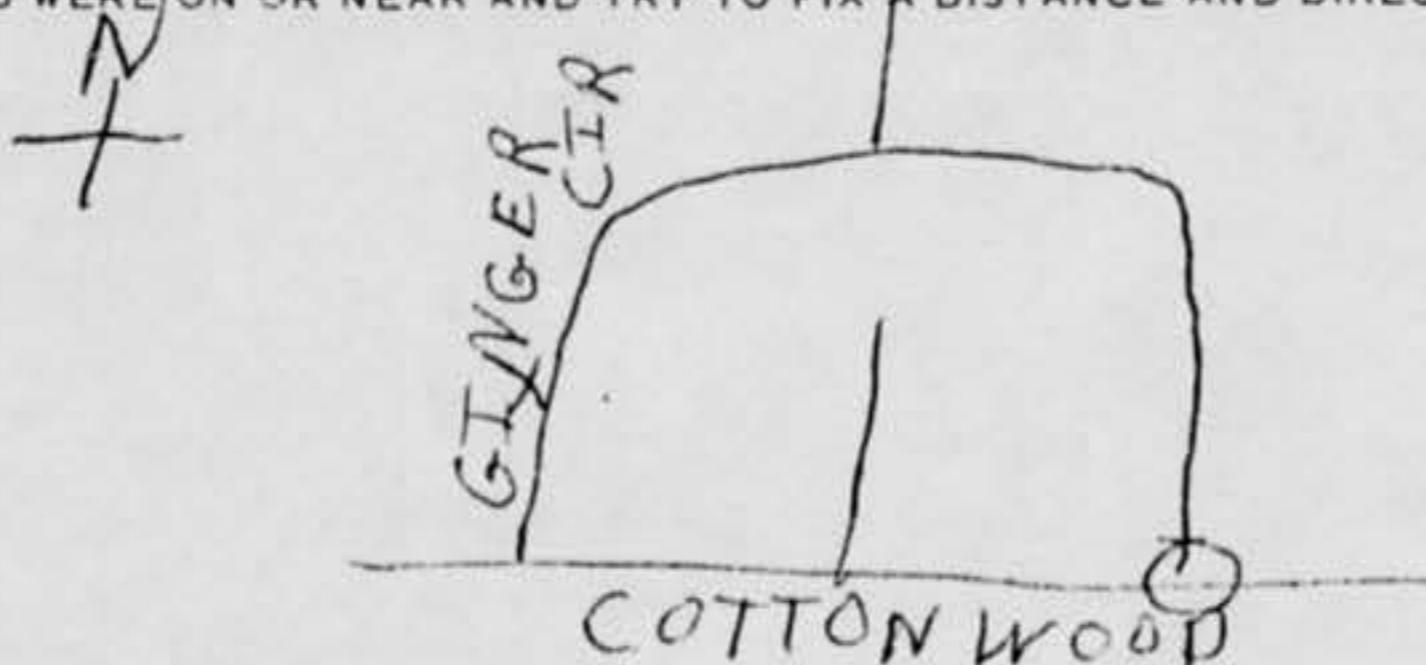
3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON?

HOUR 03 MINUTES 49 A.M. P.M.

4. TIME ZONE

 DAYLIGHT SAVINGS STANDARD EASTERN CENTRAL MOUNTAIN PACIFIC OTHER

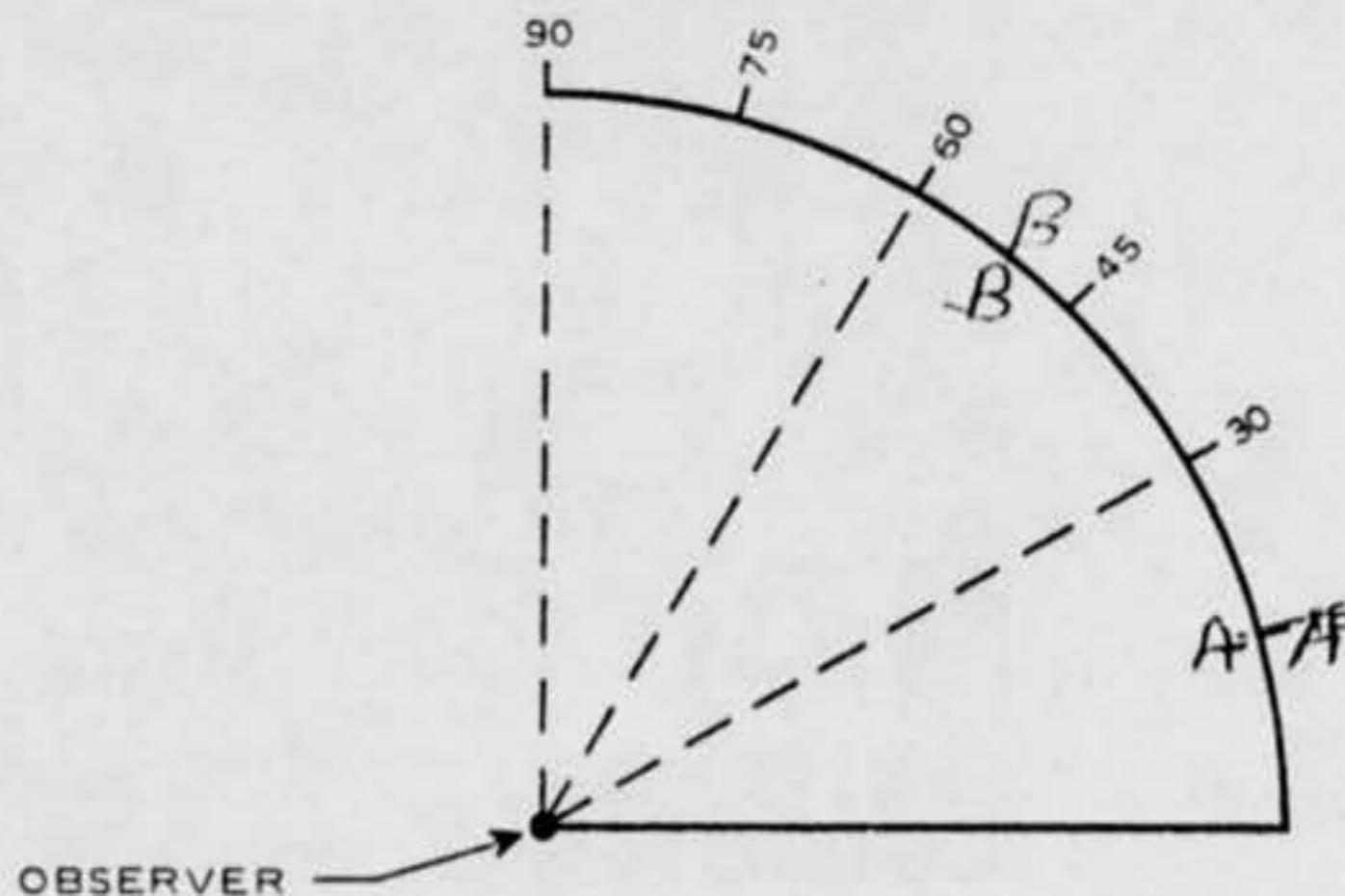
5. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? IF IN CITY, GIVE THE NEAREST STREET ADDRESS AND INDICATE ON A HAND DRAWN MAP WHERE YOU WERE STANDING WITH REFERENCE TO THE ADDRESS. IF IN THE COUNTRY, IDENTIFY THE HIGHWAY YOU WERE ON OR NEAR AND TRY TO FIX A DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.



X -

D-4FO

6. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH, PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE, WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.



10. IF THERE WERE MORE THAN ONE PHENOMENON, HOW MANY WERE THERE? DRAW A PICTURE TO SHOW HOW THEY WERE ARRANGED. DID THIS ARRANGEMENT CHANGE DURING THE SIGHTING?

11.

CONDITIONS (Check appropriate blocks.)

A.	SKY	B.	WEATHER
DAY		CUMULUS CLOUDS (Low fluffy)	FOG OR MIST
TWILIGHT		CIRRUS CLOUDS (High fleecy or Herring-bone)	HEAVY RAIN
X NIGHT		NIMBUS CLOUDS (Rain)	X LIGHT RAIN OR DRIZZLE
CLEAR			HAIL
PARTLY CLOUDY		CUMULONIMBUS CLOUDS (Thunderstorms)	SNOW OR SLEET
X COMPLETELY OVERCAST	X	HAZE OR SMOG	UNKNOWN
			NONE OF THE ABOVE

C. IF THE SIGHTING WAS AT TWILIGHT OR NIGHT, WHAT DID YOU NOTICE ABOUT THE STARS AND MOON?

(1)	STARS	(2)	MOON
	NONE	BRIGHT MOONLIGHT	X NO MOONLIGHT
	A FEW	MOON WITH HALO	UNKNOWN
	MANY	MOON HIDDEN BY CLOUDS	
X	UNKNOWN	PARTIAL (New or quarter)	

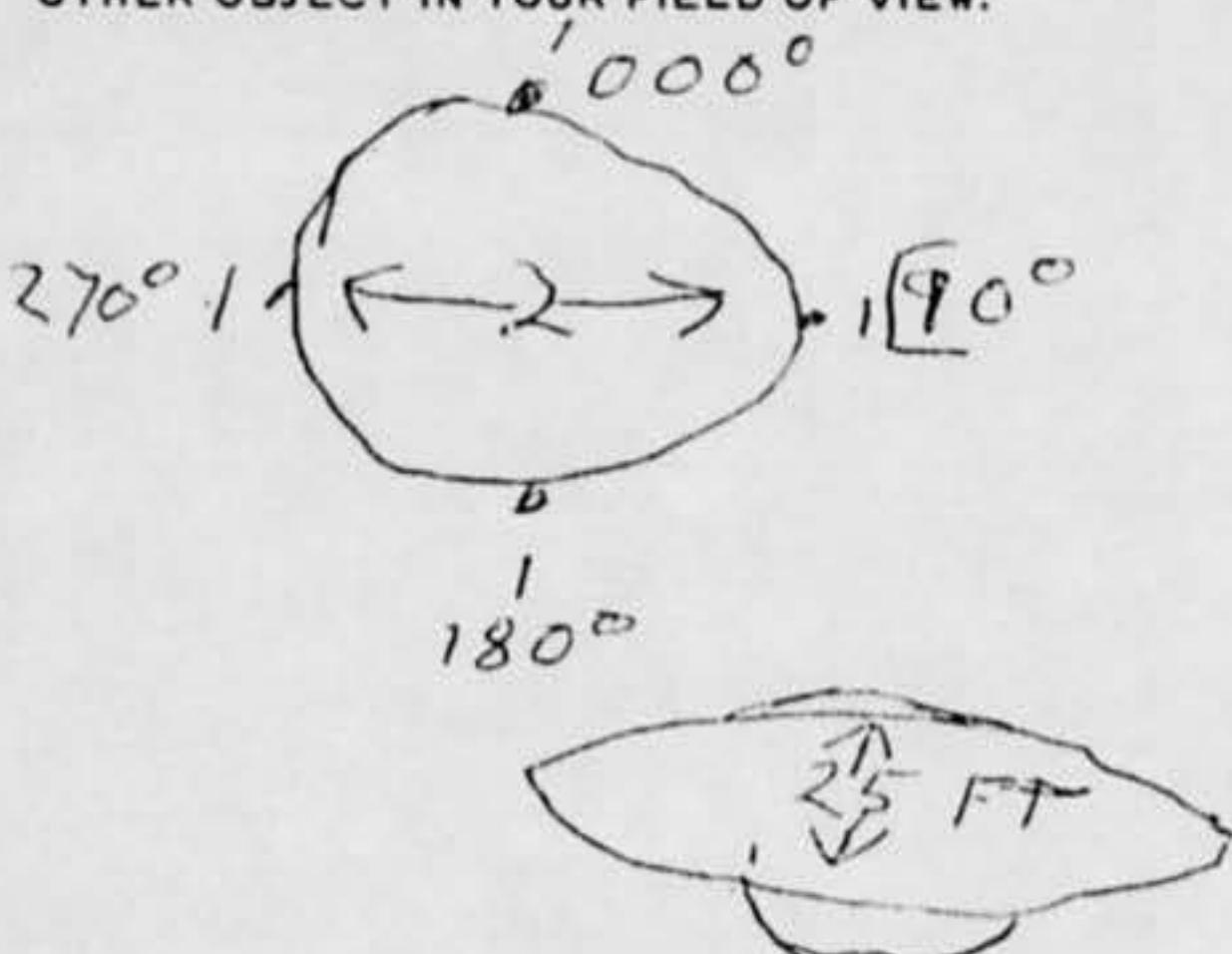
D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE? YES NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?

IN FRONT OF YOU	TO YOUR RIGHT	OVERHEAD (Near noon)
IN BACK OF YOU	TO YOUR LEFT	UNKNOWN

E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

STREET LIGHT

12. GIVE A BRIEF DESCRIPTION OF THE PHENOMENON, INDICATING WHETHER IT APPEARED DARK OR LIGHT, WHETHER IT REFLECTED LIGHT OR WAS SELF-LUMINOUS AND WHAT COLORS YOU NOTICED. DESCRIBE YOUR IMPRESSION OF WHETHER IT WAS SOLID OR TRANSPARENT, WHETHER EDGES WERE SHARP OR FUZZY. DESCRIBE THE SHAPE OR INDICATE IF IT APPEARED AS A POINT OF LIGHT. INDICATE COMPARISONS WITH OTHER OBSERVED OBJECTS, LIKE STARS, A LIGHT OR OTHER OBJECT IN YOUR FIELD OF VIEW.



1. GREEN LIGHTS (4)
2. DIAMETER (500-600)
FT
3. COLOR, MATTE
BLACK
4. SOLID
5. SHARP EDGES
6. SHAPE

8. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? (Check appropriate blocks.)

<input checked="" type="checkbox"/> OUTDOORS			IN BUSINESS SECTION OF CITY
<input type="checkbox"/> IN BUILDING		IN RESIDENTIAL SECTION OF CITY	
IN CAR	<input type="checkbox"/> AS DRIVER	<input type="checkbox"/> AS PASSENGER	IN OPEN COUNTRYSIDE
IN BOAT			NEAR AIRFIELD
IN AIRPLANE	<input type="checkbox"/> AS PILOT	<input type="checkbox"/> AS PASSENGER	FLYING OVER CITY
OTHER		FLYING OVER OPEN COUNTRY	
		OTHER	

A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:

WHAT DIRECTION WERE YOU MOVING?		HOW FAST WERE YOU MOVING?	
NORTH	EAST		
SOUTH	WEST	DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON?	
NORTHEAST	SOUTHEAST	<input type="checkbox"/> YES <input type="checkbox"/> NO	
NORTHWEST	SOUTHWEST		

EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6.

DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVESED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.

HOW MUCH OTHER TRAFFIC WAS THERE?

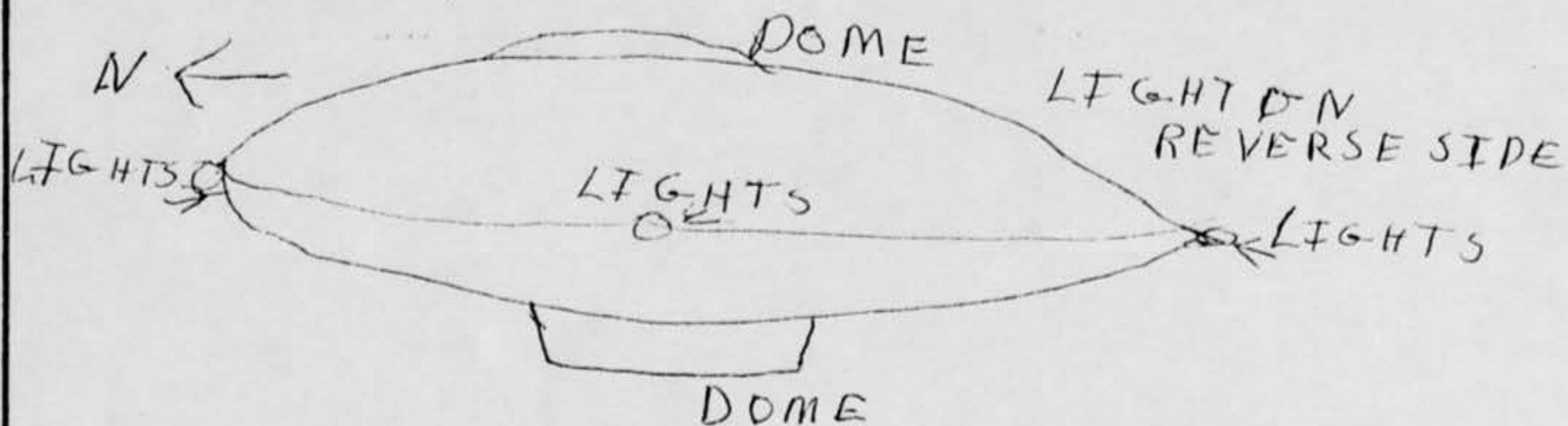
DID YOU NOTICE ANY AIRPLANES? YES NO. IF "YES," DESCRIBE WHEN THEY WERE IN SIGHT RELATIVE TO THE TIME OF SIGHTING THE PHENOMENON AND WHERE THEY WERE IN THE SKY RELATIVE TO THE POSITION OF THE PHENOMENON.

9. HOW LONG WAS THE PHENOMENON IN SIGHT?

LENGTH OF TIME <i>X-5 MINUTES</i>	<input type="checkbox"/> CERTAIN OF TIME <i>X</i>	<input type="checkbox"/> NOT VERY SURE <i>FAIRLY CERTAIN</i>
HOW WAS TIME DETERMINED? <i>WATCH</i>		

WAS THE PHENOMENON IN SIGHT CONTINUOUSLY? YES NO. IF "NO," INDICATE WHETHER THIS IS DUE TO YOUR MOVEMENT OR THE BEHAVIOR OF THE PHENOMENON, AND DESCRIBE SUCH MOVEMENT OR BEHAVIOR. INDICATE DISAPPEARANCES ON PREVIOUS SKETCHES.

15. DRAW A PICTURE THAT WILL SHOW THE SHAPE OF THE PHENOMENON. INCLUDE AND LABEL ANY DETAILS THAT MIGHT HAVE APPEARED AS WINGS OR PROTRUSIONS, AND INDICATE EXHAUST OR VAPOR TRAILS. INDICATE BY AN ARROW THE DIRECTION THE PHENOMENON WAS MOVING.



16. WHAT WAS THE ANGULAR SIZE? HOLD A MATCH AT ARM'S LENGTH IN FRONT OF A KNOWN OBJECT, SUCH AS A STREET LAMP OR THE MOON. NOTE HOW MUCH OF THE OBJECT IS COVERED BY THE HEAD OF THE MATCH. NOW IF YOU HAD BEEN ABLE TO PERFORM THIS EXPERIMENT AT THE TIME OF THE SIGHTING, ESTIMATE WHAT FRACTION OF THE PHENOMENON WOULD HAVE BEEN COVERED BY THE MATCH HEAD.

MATCH HEAD WOULD COVER
ABOUT 1 INCH.

13.	DID THE PHENOMENON	YES	NO	UNKNOWN
MOVE IN A STRAIGHT LINE?		X		
STAND STILL AT ANYTIME?		X		
SUDDENLY SPEED UP AND RUN AWAY?		X		
BREAK UP IN PARTS AND EXPLODE?		X		
CHANGE COLOR?		X		
GIVE OFF SMOKE?		X		
CHANGE BRIGHTNESS?		X		
CHANGE SHAPE?		X		
FLASH OR FLICKER?		X		
DISAPPEAR AND REAPPEAR?		X		
SPIN LIKE A TOP?		X		
MAKE A NOISE?		X		
FLUTTER OR WOBBLE?			X	

14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

SOUND LIKE ELECTRIC TRANSFORMER

A. HOW DID IT FINALLY DISAPPEAR?

HIGH SPEED RAY DOING AT ESTIMATE
SPEED OF MACH 2.8

B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?
 YES NO. IF "YES," DESCRIBE.

22. HAVE YOU EVER SEEN THIS OR A SIMILAR PHENOMENON BEFORE? YES NO. IF "YES," GIVE DATE AND LOCATION.

23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PHENOMENON? YES NO. IF "YES," DID THEY SEE IT TOO?

A. LIST THEIR NAMES AND ADDRESSES

24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME, FIRST NAME, MIDDLE NAME

ADDRESS (Street, City, County and Zip Code)

TELEPHONE (Area code and number)

AGE

17

MALE

FEMALE

INDICATE ADDITIONAL INFORMATION INCLUDING OCCUPATION AND ANY EXPERIENCE WHICH MAY BE PERTINENT.

Student have built Models for 12 years
and have flown for 1½ years
very little Military Experience (ROTC
~~([REDACTED])~~ ARMY)
5 years with Boy Scouts of America.
As a member of Scouts I hold
an Aviation Merit Badge which
to qualify I have to know
aircraft identification.

25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HAD SIGHTED THIS PHENOMENON?

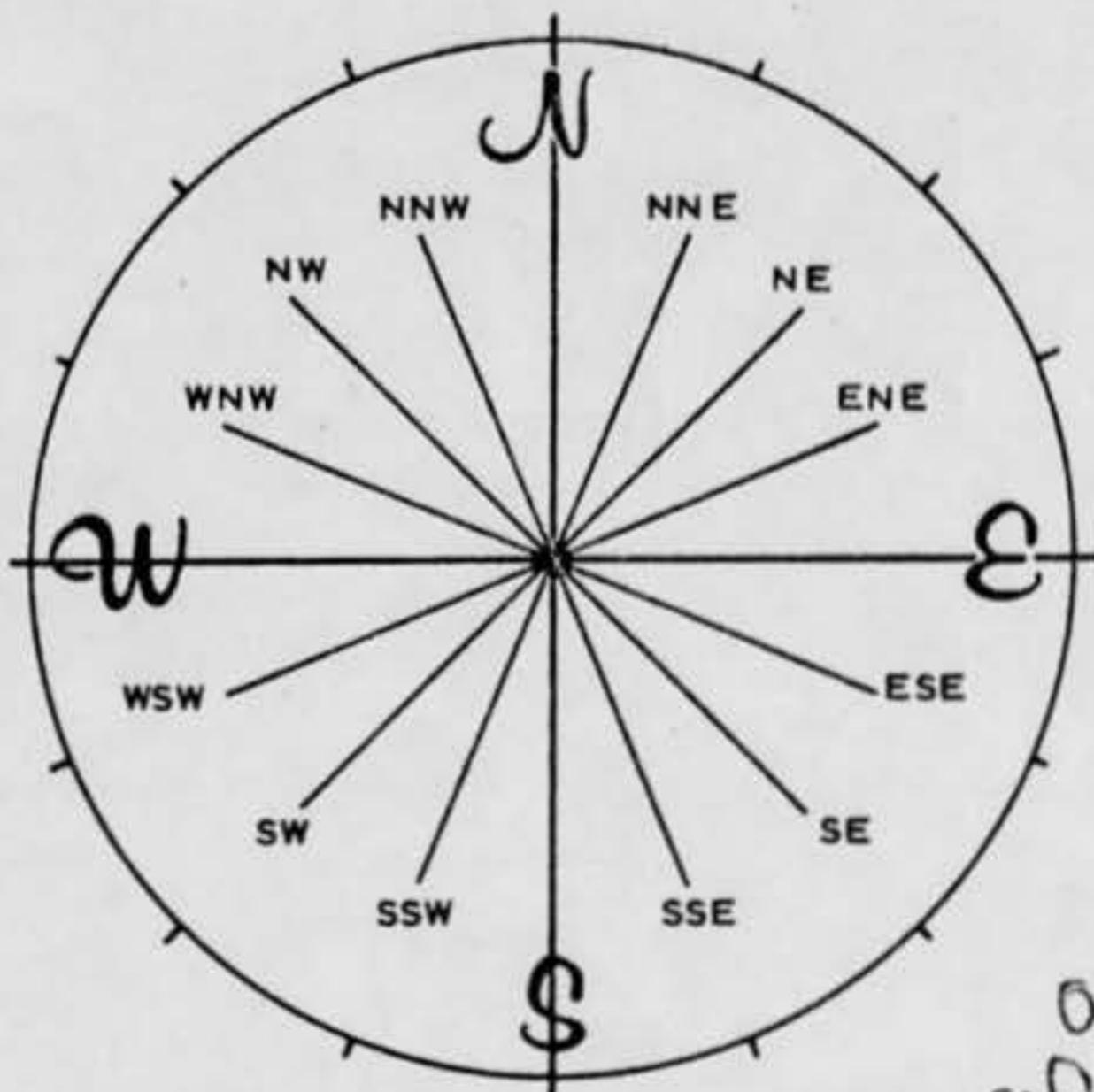
NAME NAVY MEMPHIS DAY 11 MONTH 12 YEAR 1968

26. DATE YOU COMPLETED THIS QUESTIONNAIRE.

DAY 19 MONTH 1 YEAR 1967

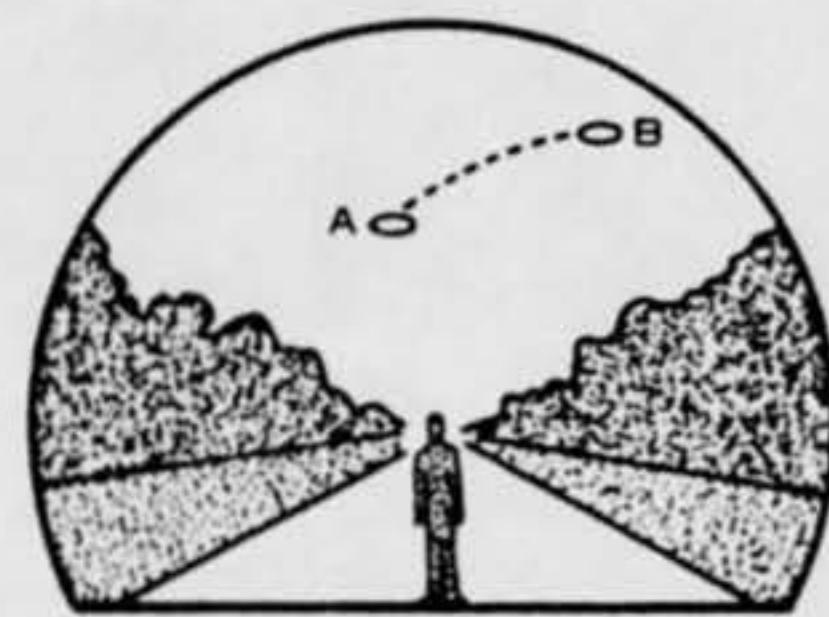
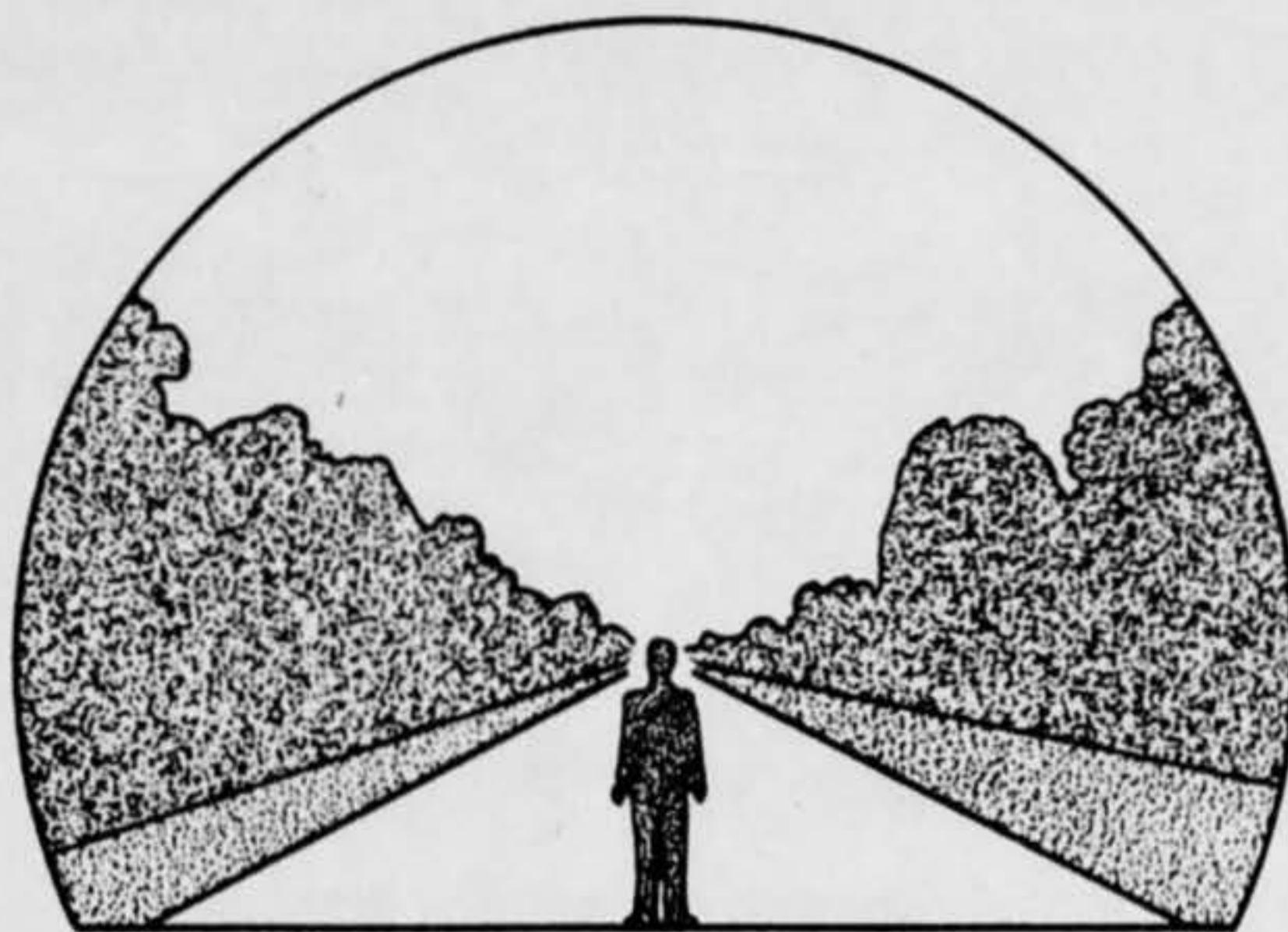
17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.				
<input checked="" type="checkbox"/> EYEGLASSES		CAMERA VIEWER		
<input type="checkbox"/> SUNGLASSES		BINOCULARS		
<input type="checkbox"/> WINDSHIELD		TELESCOPE		
<input type="checkbox"/> SIDE WINDOW OF VEHICLE		THEODOLITE		
<input type="checkbox"/> WINDOWPANE		OTHER		
A. DO YOU ORDINARILY WEAR GLASSES?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	B. DO YOU USE READING GLASSES?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
18. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED	<u>112.8</u>		19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE <u>305 YARDS</u>	
20. IN ORDER THAT WE MAY OBTAIN AS CLEAR A PICTURE AS POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS A COMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.				
<p>Picture in your mind two saucers (2) one (1) inverted on top of the other. On top of the craft was a small object like a control station, On the lower section, was what looked to be a storage section for landing legs, 4 green lights at, 000°, 090°, 180° and 270°.</p>				
21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. IF "YES," DESCRIBE.				
<p>Sounded like electric transformer,</p>				
A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES," DESCRIBE.				

6A. NOW IMAGINE YOU ARE AT THE CENTER OF THE COMPASS ROSE. PLACE AN "A" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN FIRST SEEN. PLACE A "B" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN LAST SEEN.



090° from MEMPHIS
AIRPORT

7. IN THE SKETCH BELOW, PLACE AN "A" AT THE POSITION OF THE PHENOMENON WHEN FIRST SEEN, AND A "B" AT THE POSITION OF THE PHENOMENON WHEN LAST SEEN. CONNECT THE "A" AND "B" WITH A LINE TO APPROXIMATE THE MOVEMENT OF THE PHENOMENON BETWEEN "A" AND "B". THAT IS, SCHEMATICALLY SHOW WHETHER THE MOVEMENT APPEARED TO BE STRAIGHT, CURVED OR ZIG-ZAG. REFER TO SMALLER SKETCH AS AN EXAMPLE OF HOW TO COMPLETE THE LARGER SKETCH.



SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL
NUMBER 21-R258

THIS QUESTIONNAIRE HAS BEEN PREPARED SO THAT YOU CAN GIVE THE U.S. AIR FORCE AS MUCH INFORMATION AS POSSIBLE CONCERNING THE UNIDENTIFIED PHENOMENON THAT YOU HAVE OBSERVED. PLEASE TRY TO ANSWER ALL OF THE QUESTIONS. THE INFORMATION YOU GIVE WILL BE USED FOR RESEARCH PURPOSES. YOUR NAME WILL NOT BE USED IN CONNECTION WITH ANY OF YOUR STATEMENTS OR CONCLUSIONS WITHOUT YOUR PERMISSION. RETURN TO AIR FORCE BASE INVESTIGATOR FOR FORWARDING TO FTD (TDETR), WRIGHT-PATTERSON AFB, OHIO 45433, IAW AFR 80-17. (IF ADDITIONAL SHEETS ARE NEEDED FOR NARRATIVE OR SKETCHES ATTACH SECURELY TO THIS FORM OR ANNOTATE WITH YOUR NAME FOR IDENTIFICATION.)

1. WHEN DID YOU SEE THE PHENOMENON?

DAY 12 MONTH 12 YEAR 68

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON?

HOUR 2141 MINUTES _____ A.M. P.M.

3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON?

HOUR _____ MINUTES _____ A.M. P.M.

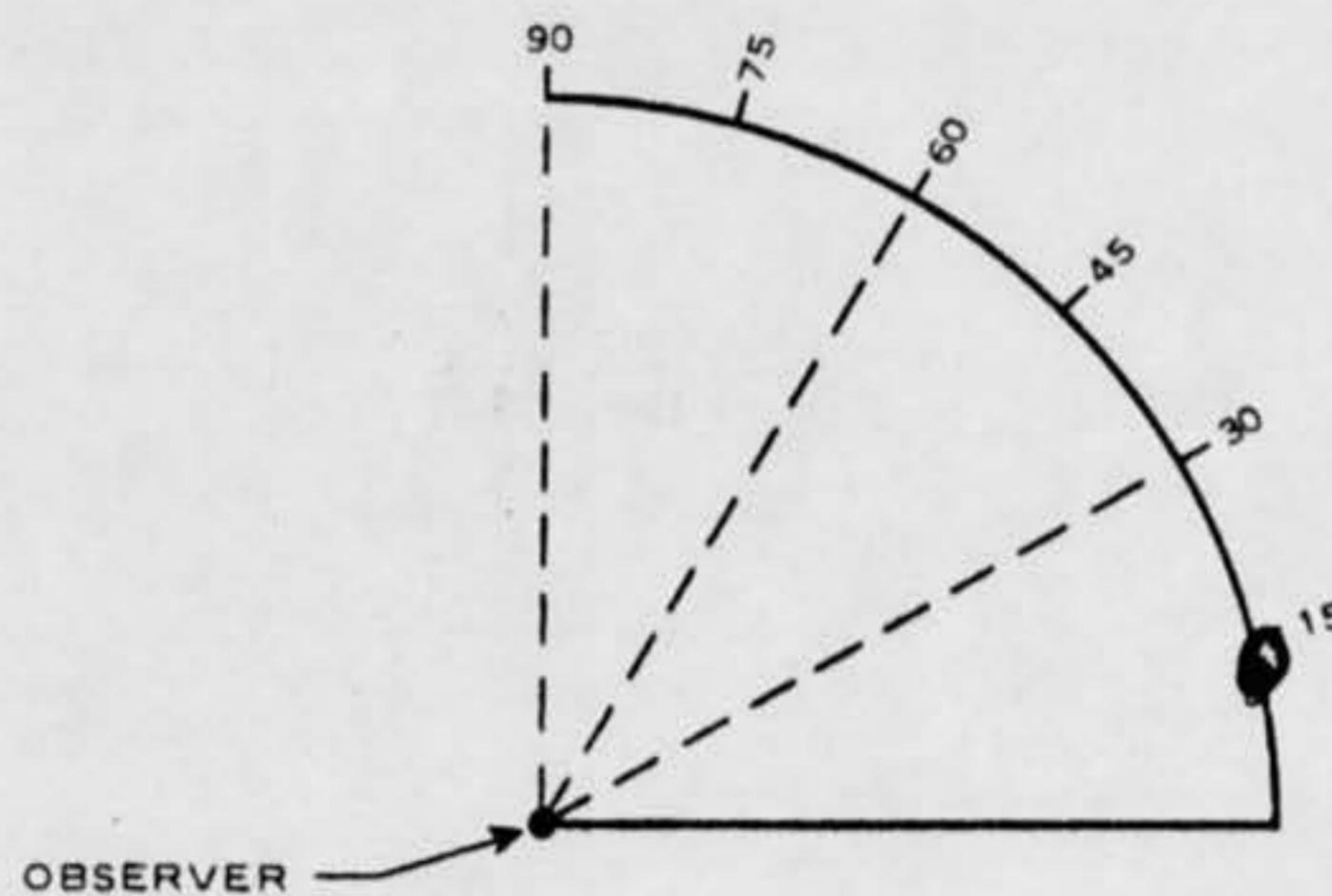
4. TIME ZONE

 EASTERN CENTRAL MOUNTAIN PACIFIC OTHER DAYLIGHT SAVINGS STANDARD

5. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? IF IN CITY, GIVE THE NEAREST STREET ADDRESS AND INDICATE ON A HAND DRAWN MAP WHERE YOU WERE STANDING WITH REFERENCE TO THE ADDRESS. IF IN THE COUNTRY, IDENTIFY THE HIGHWAY YOU WERE ON OR NEAR AND TRY TO FIX A DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.

[REDACTED] CIRCLE, MEMPHIS,
TK MN

6. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH, PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE, WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.

**SAC**

1U03811

10. IF THERE WERE MORE THAN ONE PHENOMENON, HOW MANY WERE THERE? DRAW A PICTURE TO SHOW HOW THEY WERE ARRANGED. DID THIS ARRANGEMENT CHANGE DURING THE SIGHTING?

one - 3 green lights. at 000° 090°
~~at~~ 180° 270°

11.

CONDITIONS (Check appropriate blocks.)

A.	SKY	B.	WEATHER
	DAY	CUMULUS CLOUDS (Low fluffy)	FOG OR MIST
	TWILIGHT	CIRRUS CLOUDS (High fleecy or Herringbone)	HEAVY RAIN
<input checked="" type="checkbox"/>	NIGHT	NIMBUS CLOUDS (Rain)	LIGHT RAIN OR DRIZZLE
	CLEAR		HAIL
	PARTLY CLOUDY	CUMULONIMBUS CLOUDS (Thunderstorms)	SNOW OR SLEET
<input checked="" type="checkbox"/>	COMPLETELY OVERCAST	HAZE OR SMOG	UNKNOWN
			NONE OF THE ABOVE

C. IF THE SIGHTING WAS AT TWILIGHT OR NIGHT, WHAT DID YOU NOTICE ABOUT THE STARS AND MOON?

(1)	STARS	(2)	MOON
<input checked="" type="checkbox"/>	NONE	BRIGHT MOONLIGHT	NO MOONLIGHT
	A FEW	MOON WITH HALO	UNKNOWN
	MANY	MOON HIDDEN BY CLOUDS	
	UNKNOWN	PARTIAL (New or quarter)	

D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE? YES NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?

IN FRONT OF YOU	TO YOUR RIGHT	OVERHEAD (Near noon)
IN BACK OF YOU	TO YOUR LEFT	UNKNOWN

E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

street lights -

12. GIVE A BRIEF DESCRIPTION OF THE PHENOMENON, INDICATING WHETHER IT APPEARED DARK OR LIGHT, WHETHER IT REFLECTED LIGHT OR WAS SELF-LUMINOUS AND WHAT COLORS YOU NOTICED. DESCRIBE YOUR IMPRESSION OF WHETHER IT WAS SOLID OR TRANSPARENT, WHETHER EDGES WERE SHARP OR FUZZY. DESCRIBE THE SHAPE OR INDICATE IF IT APPEARED AS A POINT OF LIGHT. INDICATE COMPARISONS WITH OTHER OBSERVED OBJECTS, LIKE STARS, A LIGHT OR OTHER OBJECT IN YOUR FIELD OF VIEW.

circular approx 600' across
sandwiched saucers - solid
could see 4 green lights clearly

8. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? (Check appropriate blocks.)					
<input checked="" type="checkbox"/> OUTDOORS			<input checked="" type="checkbox"/> IN BUSINESS SECTION OF CITY		
<input type="checkbox"/> IN BUILDING			<input checked="" type="checkbox"/> IN RESIDENTIAL SECTION OF CITY		
IN CAR	<input type="checkbox"/> AS DRIVER	<input type="checkbox"/> AS PASSENGER	IN OPEN COUNTRYSIDE		
IN BOAT				<input checked="" type="checkbox"/> NEAR AIRFIELD	<i>ABOUT 5 MILES</i>
IN AIRPLANE	<input type="checkbox"/> AS PILOT	<input type="checkbox"/> AS PASSENGER	FLYING OVER CITY		
OTHER			FLYING OVER OPEN COUNTRY		
			OTHER		
A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:					
WHAT DIRECTION WERE YOU MOVING?			HOW FAST WERE YOU MOVING?		
NORTH		EAST			
SOUTH		WEST	DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON?		
NORTHEAST		SOUTHEAST	<input type="checkbox"/> YES <input type="checkbox"/> NO		
NORTHWEST		SOUTHWEST			
EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6.					
DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVELED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.					
HOW MUCH OTHER TRAFFIC WAS THERE?					
DID YOU NOTICE ANY AIRPLANES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES," DESCRIBE WHEN THEY WERE IN SIGHT RELATIVE TO THE TIME OF SIGHTING THE PHENOMENON AND WHERE THEY WERE IN THE SKY RELATIVE TO THE POSITION OF THE PHENOMENON.					
<i>checked with 090° Memphis airport</i>			<i>CONVAIR 880</i>		
9. HOW LONG WAS THE PHENOMENON IN SIGHT?					
LENGTH OF TIME <i>5 sec</i>		CERTAIN OF TIME <i>Fairly certain</i>		NOT VERY SURE <input checked="" type="checkbox"/> JUST A GUESS	
HOW WAS TIME DETERMINED?					
WAS THE PHENOMENON IN SIGHT CONTINUOUSLY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. IF "NO," INDICATE WHETHER THIS IS DUE TO YOUR MOVEMENT OR THE BEHAVIOR OF THE PHENOMENON, AND DESCRIBE SUCH MOVEMENT OR BEHAVIOR. INDICATE DISAPPEARANCES ON PREVIOUS SKETCHES.					

13.	DID THE PHENOMENON	YES	NO	UNKNOWN
MOVE IN A STRAIGHT LINE?		✓		
STAND STILL AT ANYTIME?		✓		
SUDDENLY SPEED UP AND RUN AWAY?		✓		
BREAK UP IN PARTS AND EXPLODE?			✓	
CHANGE COLOR?			✓	
GIVE OFF SMOKE?			✓	
CHANGE BRIGHTNESS?			✓	
CHANGE SHAPE?			✓	
FLASH OR FLICKER?			✓	
DISAPPEAR AND REAPPEAR?			✓	
SPIN LIKE A TOP?			✓	
MAKE A NOISE?				✓
FLUTTER OR WOBBLE?				✓

14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

sounds like an electric transformer

A. HOW DID IT FINALLY DISAPPEAR?

speed up and disappeared

B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?
 YES NO. IF "YES," DESCRIBE.

22. HAVE YOU EVER SEEN THIS OR A SIMILAR PHENOMENON BEFORE? YES NO. IF "YES," GIVE DATE AND LOCATION.

23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PHENOMENON? YES NO. IF "YES," DID THEY SEE IT TOO?

A. LIST THEIR NAMES AND ADDRESSES

24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME FIRST NAME

ADDRESS

TELEPHONE

AREA 901 AGE 17 MALE FEMALE

INDICATE ADDITIONAL INFORMATION INCLUDING OCCUPATION AND ANY EXPERIENCE WHICH MAY BE PERTINENT.

25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HAD SIGHTED THIS PHENOMENON?

NAME _____ DAY _____ MONTH _____ YEAR _____

26. DATE YOU COMPLETED THIS QUESTIONNAIRE.

DAY _____ MONTH _____ YEAR _____

17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.

<input checked="" type="checkbox"/> EYEGLASSES	CAMERA VIEWER
<input type="checkbox"/> SUNGLASSES	BINOCULARS
<input type="checkbox"/> WINDSHIELD	TELESCOPE
<input type="checkbox"/> SIDE WINDOW OF VEHICLE	THEODOLITE
<input type="checkbox"/> WINDOWPANE	OTHER

A. DO YOU ORDINARILY WEAR GLASSES? YES NO B. DO YOU USE READING GLASSES? YES NO

18. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED MACH 1.2

19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE 200-300 YDS.

20. IN ORDER THAT WE MAY OBTAIN AS CLEAR A PICTURE AS POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS A COMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.

21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY? YES NO. IF "YES," DESCRIBE.

A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE. YES NO.
IF "YES," DESCRIBE.

12 Dec. 68

DEPARTMENT OF THE AIR FORCE
HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC)
WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433



REPLY TO
ATTN OF:

TDPT (UFO)

6 Jan 1969

SUBJECT:

UFO Observation, 12 December 1968

TO:

[REDACTED]
Memphis, Tennessee 38118

Reference your recent unidentified flying object sighting which you reported to the Air Force. The information which we have received is not sufficient for a scientific investigation. Request you complete the attached AF Form 117 and return it in the self-addressed envelope. Thank you for reporting your observation to the Air Force.

Hector Quintanilla Jr.
HECTOR QUINTANILLA, Jr, Lt Colonel, USAF
Chief, Aerial Phenomena Office
Aerospace Technologies Division
Production Directorate

1 Atch
AF Form 117 w/envelope